

MARGIN RESERVATION FOR INDEXING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

N.B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

Cav. of Columbia

(1) PLACE OF BIRTH

County of BarnwellTownship of Red Oak

Inc. Town of

City of

(if birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

48136

Registration District No. 509 Registered No. 9

(For use of Local Registrar)

(2) Full Name of Child Susan Hay

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in event of Twins or Triplets

(6) Are Parents Married? yes(7) DATE OF BIRTH Feb. 15 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

John Edmund Hay

(9) PRESENT POSTOFFICE OF FATHER

Barnwell R. F.D. 2

(10) COLOR OR RACE

negro(11) AGE AT LAST BIRTHDAY 31 (Years)

(12) BIRTHPLACE

Barnwell Co

(13) OCCUPATION

Farmer

(14) Number of children born to mother, including present birth

4

MOTHER.

(15) NAME BEFORE MARRIAGE

Marcell Wallace

(16) PRESENT POSTOFFICE OF MOTHER

Barnwell R. F.D. 2

(17) COLOR OR RACE

negro(18) AGE AT LAST BIRTHDAY 23 (Years)

(19) BIRTHPLACE

Barnwell Co

(20) OCCUPATION

Housewife

(21) Number of children of this mother now living, including present birth

4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 8 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Rebecca Carter

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

MidwifeBarnwell R. F.D. 2

Given name added from a supplemental report

191.....

Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Feb 24 1916 (28) R.C. Kishland Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.